

# EXHIBIT 5

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Angel M. Vizcarrondo Thomas

Participant's Address:

Urb. Sta. Elvira F-10 calle Santa Ana

Participant's Email Address:

Caguas P.R. 00 725

Name of Counsel:

Angel M. Vizcarrondo Thomas

Address of Counsel:

Gloria Diaz Lopez

Email Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Angel M. Vizcarrondo Thomas

Nature of Claim:

Gloria Diaz Lopez

By:

Angel M. Vizcarrondo Thomas

Signature

Gloria Diaz Lopez

Print Name

Title (if Participant is not an individual)

agosto 8/2021

Date

RECEIVED

AUG 12 2021

PRIME CLERK LLC

**Instructions for Filing Notice of Participation:** If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

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1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name:

Angel M. Vizcarrondo Thomas

Participant's Address:

Urb. Sta. Clara F-10 calle Santa Ana

Participant's Email Address:

Caguas P.R. 00725

Name of Counsel:

Angel M. Vizcarrondo Thomas

Address of Counsel:

Gloria Diaz Lopez

Email Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Angel M. Vizcarrondo Thomas

Nature of Claim:

Gloria Diaz Lopez

By:

Angel M. Vizcarrondo Thomas

Signature

Gloria Diaz Lopez

Print Name

Title (if Participant is not an individual)

Date

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Participant's Address:

Urb. Santa Elvira F-10 calle Santa Ana

Participant's Email Address:

Caguas P.R. 00725

Name of Counsel:

Gloria Diaz Lopez

Address of Counsel:

Angel M. Vizcarrondo Thomas

Email Address of Counsel:

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number:

Angel M. Vizcarrondo Thomas

Nature of Claim:

Gloria Diaz Lopez

By:

Angel M. Vizcarrondo Thomas

Signature

Gloria Diaz Lopez

Print Name

Title (if Participant is not an individual)

agosto 8/2021

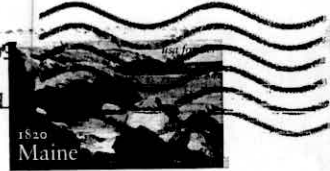
Date

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SAN JUAN PR 009  
9 AUG 2021 PM 2 1



RECEIVED  
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Prime clerk LLC  
Grand central station  
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New York, NY  
10163-4850

10163-485050

